

Application for Employment



PERSONAL INFORMATION

Name _____

Address _____ City _____

State _____ Zip Code _____

Home Phone _____ Mobile Phone _____

EMPLOYMENT DESIRED

Position _____ Start Date _____ Desired Wage \$ _____

Location of Interest: Arcadia Arrowhead Happy Valley

Hours Desired: 30 + 20-29 ↓↓20

Are you willing to work split shifts? YES NO (ex: 11:00am - 2:00pm / 5:00pm - 8:00pm)

Are you currently employed? YES NO

Hours of Availability	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Please Mark AVAILABLE Hours Only							

Are there any up-coming events and/or vacations in the next six months that may affect this schedule? YES NO

If YES, please explain: _____

1. Skills and Abilities in Reference to Position you are applying for: _____

2. How did you hear about us? (mark all that apply) Drive-by/Walk-in Friend Who? _____
 Employee Who? _____ Internet Other (Please explain) _____

3. Why do you think you would be a good fit for our company? _____

4. Are you able to multi-task in a fast paced environment? YES NO

5. Are you willing and able to stand on your feet for long periods of time? YES NO

6. Are you willing and able to lift 40lbs or more? YES NO

7. On a scale of 1-10 (1 being the slowest, 10 being fastest) how would you rate your speed? _____

8. How well do you respond to criticism in a stressful environment? _____

EDUCATION

	<u>Name & Location</u>	<u>Years Attended</u>	<u>Did you Graduate?</u>	<u>GPA/ Subjects Studied</u>
<u>High School</u>				
<u>College</u>				
<u>Trade or Technical College</u>				

CURRENT / FORMER EMPLOYERS

May we inquire of your current employer? YES NO

Month/Year	Business Name	Phone #	Ending Wage	Position/Title	Reason for Leaving
Start					
End					
Start					
End					
Start					
End					
Start					
End					

BUSINESS REFERENCES (former employers, co-workers, etc. / no friends or family members please)

Name	Phone #	Address	Business Name	Years Known

AUTHORIZATION

“I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information that may have been personal or otherwise, and release the company from all liability for any damage that may result in the utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by and authorized Joey’s of Chicago representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.”

Date _____

Signature _____